Health Safety Net 837I
Testing & Transition
Update
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Division of Health Care Finance & Policy

2 Boylston Street

Boston, MA 02116

Presented by: Marc Prettenhofer

HSN 837I Overall Progress

- 15 Providers have yet to transition from Test to Production (52 are transitioned; 1 will within 2 weeks)

- Of the 15; 7 have not tested within the last 3 weeks

- Successful habits of Providers that transitioned:
  - Test frequently, 2-3 files a week (due to different HSN types)
  - Maintain open communication with the Division on hurdles
  - Provide data directly to their vendors, no middleman
  - Update vendor products accordingly in-house
  - Follow error resolution process
  - Provide feedback on process to the Division
  - Open communication with providers of like-systems
  - Do not work any of the Warnings on Field Edit Report (Validation Report)

HSN 837 Go-Live Delays – Division

- Processing of Test files is manual

- INET sweep for results on 4-hour cycle – this is the same for Production

- Eligibility re-writes for REVS/MA-21 issues

- Timing of internal updates with file processing

- Help Desk handoff not as clean as planned

- Production system failures take precedence

HSN 837 Go-Live Delays - Provider

- Testing not consistent over time

- Error resolution not consistent over time

- New staff involved in error resolution during Testing

- Working Warnings before Errors

- Vendors unaware of SENDS/INET process

- Multiple staff communicating to the Division, but not asking the same question

- Submitting Spec changes after the Specification Change Request Period has closed

- Delay in updating Vendor product

HSN 837 Go-Live Transition - How To

- Submit a file with at least the minimum average

- Minimum passing claims must meet threshold (80%)

- Work with the Help Desk to have IT approve provider ORG ID for Go-Live Readiness (**866-697-6080**)

- Email is sent to provider's main contact alerting to success

- Paper Packet is sent to provider alerting of process and 'hand-shake' date sign-off

- Packet is received and ORG ID is set-up for 837 Production submissions for stated date in Packet

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HSN 837 Go-Live News

- Every HSN837 file receives an HSN835 file

- HSN835 will contain all claims to alert providers of Acceptance and Denials for posting – this includes claims that deny for Eligibility or Covered Services at the claim level

- HSN835 uses only two Claim Status Codes

  - 25 for claims accepted into the system for payment consideration
  - 4 for claims not accepted (denied) into the system
    - *Use of 17 for Medical Hardship was removed from use due to provider feedback on inference to another 'determination' 835 needed*

- HSN835 uses Claim Adjustment Reason Code CO*A7 in conjunction to Claim Status Code 25 to identify an 'accepted claim' and will report the full claim amount back to provider

- HSN835 uses various Claim Adjustment Reason Codes in conjunction with Claim Status Code 4 to identify a denied claim and will report the full claim amount back to the provider

HSN 837 Go-Live News continued

- Recent production errors helped to identify some technical issues that have since been corrected

- HSN835 updated specification to be posted within the week along with the LX explanations and CAS list as used by HSN

- COB segments are under review again due to recent information at the Technical Advisory Group meeting with MHA – update forthcoming via email

- Help Desk is able to take any and all calls and aids in providers obtaining timely responses, 866-697-6080

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